

**City of Portland, Maine - Building or Use Permit Application**  
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

<b>PERMIT ISSUED</b>		Permit No: 02-0638	Issue Date: JUN 14 2002	CBL: 394 A070001
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Location of Construction: 217 Summit St	Owner Name: Kilbride Marguerite B	Owner Address: 233 Summit St <b>CITY OF PORTLAND</b>	Phone:
Business Name:	Contractor Name: Kimball, Peter J.	Contractor Address: 108 Harriett Street South Portland	Phone: 2077995461
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone:

Past Use: Single Family	Proposed Use: Single Family	Permit Fee: \$30.00	Cost of Work: \$30.00	CEO District:
FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: Use Group: <i>R</i> Type: <i>5B</i> <i>6/13/02</i> Signature: <i>[Signature]</i>				

Proposed Project Description:  
 Install in Basement a 275 Gallon Oil Tank with ~~\_\_\_\_\_~~ money  
*4 FURNACE.*

Signature: \_\_\_\_\_  
 PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)  
 Action:  Approved  Approved w/Conditions  Denied  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Permit Taken By: *gg* Date Applied For: *06/12/2002*

Zoning Approval		
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..	<b>Special Zone or Reviews</b> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>N/A</i>	<b>Zoning Appeal</b> <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date:
<b>Historic Preservation</b> <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date:		

**CERTIFICATION**

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application is issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable to such permit.

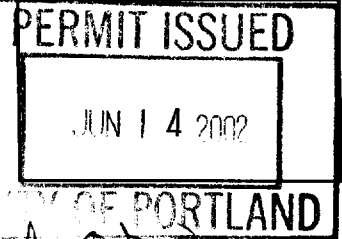
SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE



FILL IN AND SIGN WITH INK

02-0638

# APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT



394-A 070

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to install the following heating, cooking or power equipment in accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications:

Location 217 Summit St. Use of Building \_\_\_\_\_ Date \_\_\_\_\_

Name and address of owner of appliance MARGUERITE KILBRIDE

Installer's name and address PETER J. KIMBALL 108 HARRIET ST. SA. PORTLAND Telephone 799-5461 09/06/2005

### Location of appliance:

- Basement
- Attic
- Floor
- Roof

### Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name: BURNHAM

U.L. Approved  Yes  No

Will appliance be installed in accordance with the manufacture's installation instructions?  Yes  No

IF NO Explain: \_\_\_\_\_

### The Type of License of Installer:

- Master Plumber # \_\_\_\_\_
- Solid Fuel # \_\_\_\_\_
- Oil # MS 20005132
- Gas # \_\_\_\_\_
- Other \_\_\_\_\_

### Type of Chimney:

Masonry Lined  
Factory built \_\_\_\_\_

Metal  
Factory Built U.L. Listing # \_\_\_\_\_

Direct Vent  
Type \_\_\_\_\_ UL# \_\_\_\_\_

### Type of Fuel Tank

- Oil
- Gas

Size of Tank 275

Number of Tanks 1

Distance from Tank to Center of Flame 5' feet.

30.00

### Approved

### Approved with Conditions

Fire: \_\_\_\_\_

Ele.: \_\_\_\_\_

Bldg.: [Signature]

See attached letter or requirement

Signature of Installer Peter J. Kimball